



AMENDA Applicant(s): Hid	TENT TRANSMIT eyuki ISHIKAWA		Docket No. 12127-053										
Serial No. 09/864,836	Filing	Date 4, 2001	Examiner Karin Reichle		Group Art Unit 3761								
Invention: DISPOSABLE DIAPER AND METHOD OF MAKING THE SAME													
TO THE COMMISSIONER FOR PATENTS: Transmitted herewith is an amendment in the above-identified application.													
The fee has been calculated and is transmitted as shown below. CLAIMS AS AMENDED													
	CLAIMS REMAINING	HIGHEST#	NUMBER EXTRA	RATE	ADDITIONAL								
	AFTER AMENDMENT		R CLAIMS PRESENT	x \$18	00 \$0.00								
TOTAL CLAIMS	9 -	20 =		x \$86									
INDEP. CLAIMS	2 -			12	\$0.00								
Multiple Dependent Claims (check if applicable) TOTAL ADDITIONAL FEE FOR THIS AMENDMENT \$0.00													
 No additional fee is required for amendment. □ Please charge Deposit Account No. in the amount of □ A check in the amount of to cover the filing fee is enclosed. ☑ The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. ☑ Any additional filing fees required under 37 C.F.R. 1.16. ☑ Any patent application processing fees under 37 CFR 1.17. Dated: December 8, 2003 Filed via facsimile transmission. I certify that this document and fee is being deposited on with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioney for Patents, P.O. Box 1450, Alexandria, VA 2231-3450 Signature of Person Mailing Correspondence													
cc:													
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PTO/SB/17 (08-03)

Approved for use through 07/31/2008. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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FEE IRANSIMITIAL				Application Number			09/864,836			
for FY 2	Filing Date			May 24,	May 24, 2001					
Effective 01/01/2003, Patent fees are suit	хη.	First Named Inventor			tor Hideyul	Hideyuki ISHIKAWA				
		Examiner Name				Karin Reichle				
Applicant claims small entity status. See 37 CFR 1.27			Art Unit			3761	3761			
TOTAL AMOUNT OF PAYMENT (\$) \$1,080					cket N	o. 121027-	121027-053			
			/Albino) Section					41		
METHOD OF PAYMENT		FEE CALCULATION (continued)								
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Charge fee(s) indicated below Credit any overpayments			920*	1804		action		•		
Charge any additional fee(s) during the pendency of this application			1.840*	18051	1,840*	Requesting publi action	cation of SII	R after Examiner		
Charge fee(s) indicated below, except for the filing fee			110	2251		Extension for rep	dy within tire	t month		
to the above-identified deposit account.		1251 1252			205	Extension for rep	ly within sec	cond month	310.00	
FEE CALCULATIO	N	1253		2253	485	Extension for rep	ely within this	d month		
1. BASIC FILING FEE		1264		2254	725	Extension for rep	dy within fou	rth month		
Large Entity Small Entity Fee Fee Fee Descriptio	n	1255	1,970	2255	985	Extension for rep	yly within fift	month		
Code (\$) Code (\$)	Fee Paid	1401	320	2401		Notice of Appeal				
1001 750 2001 375 Utility filing fee		1402	320	2402	150	Filing a brief in s	upport of an	appeal		
1002 330 2002 165 Design filing 1003 520 2003 260 Plant filing fee		1403	280	2403		Request for oral				
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1004 750 2004 375 Reissue ming 1005 160 2005 80 Provisional filing	fee	1452	110	2452		Potition to revive				
SUBTOTAL (1)	(\$)	1453	1,300	2453		Patition to revive		mai		
			1,300	2501	650	Utility issue fee ((or reisaue)			
2. EXTRA CLAIM FEES FOR UTILITY AND			470	2502		Design issue fed	;		·	
Extra Claims	below Fee Paid	1500	630	2503		Plant issue fee				
Total Claims	= 0.00	: 1464	130	i		Petitions to the				
Independent 3** 0 X _ Claims Multiple Dependent		1807	7 50	i		Processing fee u				
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1202 18 2202 9 Claims in exces	ss of 20	1809	750	2809	375	Filing a submiss (37 CFR § 1.12	sion after fina 29(a))	al rejection		
120,	aims in excess of 3	1810	750	2810	375	For each addition	nal Inventio	n to be examined		
	dent ctaim, if not paid ependent claims	1801	1 750	2801	375	Request for Car		nination (RCE)	770.00	
1204 84 2204 42 ** Reissue Inde over original		1802		1802						
1205 18 2205 9 "Reissue claims in excess of 20 and over original patent			1802 900 1802 900 Request for expedited examination of a design application Other fee (specify)							
SUBTOTAL (2)										
**or number previously paid, if greater; For	*Re	*Reduced by Basic Filing Fee			Fee Paid	Paid SUBTOTAL (3		\$1,080.00		
SUBMITTED BY						Complete (7 applicable)			
	S. Gzybowski			ration N eyrAgent)		32,816	Telephone	734-99	5-3110	
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PAGE 4/23* RCVD AT 12/8/2003 2:59:17 PM [Eastern Standard Time] * SVR:USPTO-EFXRF-1/6 * DNIS:8729303 * CSID:734 995 1777 * DURATION (mm-ss):05-50